SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DCCC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ACTBLUE PAC Date of Receipt Mailing Address 366 SUMMER ST 2020 11 City Zip Code State Transaction ID: 32002076E MA **SOMERVILLE** 02144-3132 Amount of Each Receipt this Period FEC ID number of contributing 4.00 C00401224 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) CONDUIT TOTAL LISTED IN AGG. FIE Receipt For: Aggregate Year-to-Date ▼ Primary General NOTE: ABOVE CONTRIBUTION EARMARKED 6012286.12 THROUGH THIS ORGANIZATION. Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BUDD, PATRICIA, , , Date of Receipt Mailing Address 2250 GOODWOOD BLVD SE 10 2020 City State Zip Code Transaction ID: 32002086 **SMYRNA** GA 30080-8205 Amount of Each Receipt this Period FEC ID number of contributing 13.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) N/A **UNEMPLOYED** Receipt For: Aggregate Year-to-Date ▼ Primary General * EARMARKED CONTRIBUTION: SEE BELOW Other (specify) ▼ 346.01 EARMARKED THROUGH ACTBLUE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ACTBLUE PAC Date of Receipt Mailing Address 366 SUMMER ST 10 11 2020 City Zip Code State Transaction ID: 32002086E MA SOMERVILLE 02144-3132 Amount of Each Receipt this Period FEC ID number of contributing 13.00 C00401224 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONDUIT TOTAL LISTED IN AGG. FIE Receipt For: Aggregate Year-to-Date ▼ Primary General NOTE: ABOVE CONTRIBUTION EARMARKED 6012286.12 Other (specify) THROUGH THIS ORGANIZATION. 13.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 1 9 1 1 9 1 1 9